

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709640

FILED
Apr 30, 2005
Secretary of State

Entity Name: THE FIFTH STREET BAPTIST CHURCH OF KEY WEST, INC.

Current Principal Place of Business:

1311 5TH ST
KEY WEST, FL 33040 US

New Principal Place of Business:

Current Mailing Address:

1311 5TH ST
KEY WEST, FL 33040 US

New Mailing Address:

FEI Number: 70-9640540

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOZA, EDWARD
2226 HARRIS AVENUE
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GIBSON, BEN,
Address: 3608 NORTHSIDE DRIVE
City-St-Zip: KEY WEST, FL

Title: SD () Delete
Name: BOZA, EDWARD R,
Address: 2226 HARRIS AVE
City-St-Zip: KEY WEST, FL

Title: T () Delete
Name: FLENNER, ANN
Address: 84 KEY HAVEN ROAD
City-St-Zip: KEY WEST, FL 33040

Title: D () Delete
Name: LETO, DAROLD,
Address: 404 CACTUS DRIVE
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GIBSON, BEN,
Address: 22808 PRIVATEER DRIVE
City-St-Zip: CUDJOE KEY, FL 33042

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDWARD R. BOZA

SD

04/30/2005

Electronic Signature of Signing Officer or Director

Date